PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective December 8, 2004									10	10/585014			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	ITITY	OF		R THAN ENTITY	
U.S	S. NATIONAL	STAGE FEES						RATE	FEE	7	RATE	FEE	
ВА	SIC FEE		SMALL ENT	Γ. = \$ 150	LAR	GE ENT. = \$ 300		BASIC FEE	†		BASIC FEE		
EX.	AMINATION FE	E	Satisfies PCT / (4) = \$ 50	Article 33(1)-		other situations = \$ 100 / \$ 200		EXAM. FEE	 	┤	EXAM. FEE	1300	
SEARCH FEE			All other situat Search = \$ 250	ions (ie. No Rpt.)	U.S. Is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			SEARCH FEE	 		SEARCH FEE	200	
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =	 	-	V # 050	400	
TO.	TAL CHARGEA	BLE CLAIMS	22 mi	inus 20 =	*	2		X \$ 25 =	 	-	X \$ 250 =	+	
IND	EPENDENT CL	-AIMS		ninus 3 =				X \$ 100 =	 	OR	X \$ 50 =	100	
MU	LTIPLE DEPEN	DENT CLAIM PR		<u> </u>	-				ļ	OR	X \$ 200 =	<u> </u>	
		e in column 1 is		o, enter "0)" in co	olumn 2		+ \$ 180 =		OR	+ \$ 360 =		
		·		-, -,	, ,,,,	Julii Z		TOTAL	<u> </u>	OR	TOTAL	100	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENT								NTITY	OR .	OTHER SMALL I			
AMENDMENT'A		REMAINING AFTER AMENDMENT		: NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ī	+ \$ 180 =		OR	+ \$ 360 =		
							•	TOTAL ADDIT. FFF		OR	TOTAL ADDIT.		
		(Column 1)	-	(Colum	ın 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* .	Minus	**		=	ſ	·X \$ 25 =		OR	X \$ 50 =	1 44	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						t	+ \$ 180 =		OR	+ \$ 360 =		
							Ļ	OTAL ADDIT:			OTAL ADDIT.		
***	ir the "Highest Nu If the "Highest Nu	mn 1 is less than the mber Previously Paic mber Previously Paic nber Previously Paid	l For" IN THIS SP. I For" IN THIS SP.	ACE is less t	than '20'	, enter "20".	the a	appropriate box t	n column 1.				